

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 101

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CA Hospital Assn PAC-Fed, Sponsored by CA Assn of Hospitals & Health Sytems (CA-HHS)

A.

Full Name (Last, First, Middle Initial)
Wright Lassiter

Mailing Address 1411 E 31st St

City State Zip Code
Oakland CA 94602

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alameda County Medical Center

Occupation
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: INC.A.8033

Amount of Each Receipt this Period

375.00

B.

Full Name (Last, First, Middle Initial)
Lou Lazatin

Mailing Address 1328 22nd Street

City State Zip Code
Santa Monica CA 90404

FEC ID number of contributing
federal political committee.

C

Name of Employer
Saint John's Health Center

Occupation
President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 0

Transaction ID: INC.A.8014

Amount of Each Receipt this Period

1250.00

C.

Full Name (Last, First, Middle Initial)
John LeMoine

Mailing Address 7901 Frost St.
Room 334

City State Zip Code
San Diego CA 92123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sharp HealthCare

Occupation
Chief Medical Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 0

Transaction ID: INC.A.8028

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)

2875.00

TOTAL This Period (last page this line number only)